

# IRA Distribution Request Form

Please return to:

**Overnight Mail**

The Commerce Funds  
C/O SS&C Global Investor & Distribution Solutions, Inc.  
330 West Ninth St.  
Kansas City, MO 64105

**Regular Mail**

The Commerce Funds  
C/O SS&C Global Investor & Distribution Solutions, Inc.  
P.O. Box 219525  
Kansas City, MO 64121-9525

**1 INVESTOR INFORMATION**  Please check here if this is a new address

First Name M.I. Last Name

Street Address Apt # Date of Birth

City State Zip Code

Social Security Number Daytime Phone Number

**2 YOUR IRA** Please choose only one.

Traditional IRA     Roth IRA     SEP IRA     SARSEP IRA     Coverdell Education Savings Account     SIMPLE IRA

**3 TYPE OF DISTRIBUTION** Please choose only one.

Normal Distribution — Age 59 1/2 or older     Required Minimum Distribution     Premature Distribution\*     Death

Excess Contribution — Current Year     Excess Contribution — Prior Year     Disability     Other \_\_\_\_\_

\* Penalties may apply. Please consult your tax advisor.

**4 FEDERAL INCOME TAX WITHHOLDING**

The law requires that federal income tax be withheld from certain IRA distributions unless you elect not to have withholding apply. If you so elect, you may be responsible for payment of estimated tax. You may also incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient. Please contact a qualified tax advisor for more information.

Please make your election below You may revoke your election in writing at any time. **Please note, if no federal election is made, then 10% of your distribution will be withheld for federal income taxes. No withholding election should be made for withdrawals from an Education IRA.**

Do not withhold federal income tax from my distribution.

Withhold federal income tax from my distribution at the rate of \_\_\_\_\_.

**5 PAYMENT INSTRUCTIONS** Please choose only one. See Section 9 for Medallion Signature Guarantee information.

Send payment to me by check at the above address.

Send payment to my bank account by ACH Payment.

Send payment to my bank account by Wire Transfer.

Make check payable to and mail as indicated below.

Name

Street Address

City State Zip Code

Invest my distribution in my non-IRA Commerce Funds account.\*

Fund Name Account Number

Attach voided check here

\* If a new account, please submit an Account Application.

**6 DISTRIBUTION INSTRUCTIONS**

Consolidate distributions into one disbursement (Check, ACH or Wire)

**A One-time full or partial distribution**

Fund Name	Fund #*	Account Number	Amount	or	%	or	All
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	,	<input type="text"/>	.	<input type="text"/>
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	,	<input type="text"/>	.	<input type="text"/>
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	,	<input type="text"/>	.	<input type="text"/>
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	,	<input type="text"/>	.	<input type="text"/>

Consolidate distributions into one disbursement (Check, ACH or Wire)

**B. Recurring Distribution**

Fund Name	Fund #*	Account Number	Amount
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>
_____	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>

\* Can be found on account statement

- I wish to take distribution(s) based on my life expectancy.
- I wish to take the minimum distribution based upon my and my designated beneficiary's joint life expectancy.
- I wish to take distributions for the fixed period of \_\_\_ years (not to exceed the joint life expectancy of my designated beneficiary and me).
- I have calculated the amount of my required distributions pursuant to the Internal Revenue Code and request a distribution of \_\_\_\_\_ or \_\_\_\_\_% of my account per year.
- I am over the age 59 1/2 and wish to take my dividends in cash.
- I am over the age 59 1/2 and wish to take my capital gains in cash.

1. Begin distributions on \_\_\_\_\_ in \_\_\_\_\_.  
(month) (year)
2. Please make distributions on the \_\_\_\_\_ day (between the 3rd and the 26th) of the month(s) indicated below.  
(If no date is selected, the 25th will be used.) Please note, payments by check are processed on the 25th of the month only.
3. Select frequency of periodic distributions (does not apply to cash dividends and capital gains.)  
 All months or check all that apply   
  January     February     March     April     May     June  
 July     August     September     October     November     December

**7 SIMPLE IRA Distributions only**

I have participated in a SIMPLE IRA plan of my employer for  less than 2 years\* or  2 or more years.

\*If you have not been a participant for at least 2 years, your distribution may be subject to an additional 25% premature penalty tax unless an exception applies.

**8 YOUR SIGNATURE**

I certify that I am the proper party to receive payment(s) from this IRA and that all information provided by me is true and accurate. I further certify that no tax advice has been given to me by The Commerce Funds. All decisions regarding this withdrawal are my own. I expressly assume the responsibility for any adverse consequences which may arise from this withdrawal and I agree that The Commerce Funds shall in no way be held responsible.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**9 MEDALLION SIGNATURE GUARANTEE**

A Medallion Signature Guarantee assures that the signature is genuine and not a forgery. The financial institution providing the Guarantee is financially liable for the transaction if the signature is a forgery. Eligible guarantors include Commercial Banks, Trust Companies, Savings Associations and Credit Unions as defined by the Federal Deposit Insurance Act.

Note: A Guarantee from a Notary Public is not acceptable.

A Medallion Signature Guarantee is required if:

1. Amount is over \$50,000.
2. You want your check made payable to someone other than yourself.
3. Your address has changed within the last 30 days.
4. You want the check mailed to an address other than the address of record.
5. You want the proceeds sent to a bank account not on file.
6. You are the beneficiary of the account and the account owner is deceased.<sup>†</sup>

<sup>†</sup> Other documentation may be required.

Affix Medallion Signature

Guarantee stamp here

Please contact a representative.  
Name of eligible guarantor institution: \_\_\_\_\_

# 2023 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

## General Instructions

Section references are to the Internal Revenue Code.

### Future developments

For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to [www.irs.gov/FormW4R](http://www.irs.gov/FormW4R).

### Purpose of form

Complete Form W-4R to have payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use Form W-4R for periodic payments (payments made in installments at regular intervals

over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

### Caution

If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

## 2023 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See page 3 for more information on how to use this table.

Single or Married filing separately		Married filing jointly or Qualifying surviving spouse		Head of household	
Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more	Total income over—	Tax rate for every dollar more
\$0	0%	\$0	0%	\$0	0%
13,850	10%	27,700	10%	20,800	10%
24,850	12%	49,700	12%	36,500	12%
58,575	22%	117,150	22%	80,650	22%
109,225	24%	218,450	24%	116,150	24%
195,950	32%	391,900	32%	202,900	32%
245,100	35%	490,200	35%	252,050	35%
591,975*	37%	721,450	37%	598,900	37%

\* If married filing separately, use \$360,725 instead for this 37% rate.

## 2023 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

### General Instructions (continued)

#### Nonperiodic payments—10% withholding

Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments **unless** you enter a different rate on line 2. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering “-0-” on line 2. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including “-0-”) on any payments to be delivered outside the United States and its territories.

**NOTE:** If you don’t give Form W-4R to your payer, you don’t provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can’t honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2023, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

#### Eligible rollover distributions—20% withholding

Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of

the distribution. You can’t choose withholding at a rate of less than 20% (including “-0-”). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don’t give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are **not** eligible rollover distributions: (a) qualifying “hardship” distributions, and (b) distributions required by federal law, such as required minimum distributions. See Pub. 505 for details. See also Nonperiodic payments—10% withholding above.

**Payments to nonresident aliens and foreign estates** Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

#### Tax relief for victims of terrorist attacks

If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter “-0-” on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

## 2023 Substitute Form W-4R Instructions – Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

### Specific Instructions

#### Line 1b

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

#### Line 2

##### More withholding

If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

##### Less withholding (nonperiodic payments only)

If permitted, you may enter a lower rate on line 2 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

##### Suggestion for determining withholding

Consider using the Marginal Rate Tables on page 1 to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on those sources of income has not been paid through other withholding or estimated tax payments, you can pay that tax through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use the table for your filing status as a guide to find a rate of withholding for amounts above the total income level in the table.

To determine the appropriate rate of withholding from the table, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2. (See Example 1 below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and

(b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on line 2. (See Example 2 below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

#### Examples

Assume the following facts for Examples 1 and 2. Your filing status is single. You expect the taxable amount of your payment to be \$20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

**Example 1:** You expect your total income to be \$60,000 without the payment. Step 1: Because your total income without the payment, \$60,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Step 2: Because your total income with the payment, \$80,000, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

**Example 2:** You expect your total income to be \$42,500 without the payment. Step 1: Because your total income without the payment, \$42,500, is greater than \$24,850 but less than \$58,575, the corresponding rate is 12%. Step 2: Because your total income with the payment, \$62,500, is greater than \$58,575 but less than \$109,225, the corresponding rate is 22%. The two rates differ. \$16,075 of the \$20,000 payment is in the lower bracket (\$58,575 less your total income of \$42,500 without the payment), and \$3,925 is in the higher bracket (\$20,000 less the \$16,075 that is in the lower bracket). Multiply \$16,075 by 12% to get \$1,929. Multiply \$3,925 by 22% to get \$863.50. The sum of these two amounts is \$2,792.50. This is the estimated tax on your payment. This amount corresponds to 14% of the \$20,000 payment (\$2,792.50 divided by \$20,000). Enter "14" on line 2.